

EXHIBIT 11

Participant must provide all of the information below **in English**:

1. Participant's contact information, including email address, and that of its counsel, if any:

Participant's Name: Angeles Cruz Serrano
Participant's Address: Hc-3 Box 40592 Caguas, P.R. 00725
Participant's Email Address: cruzangie555@gmail.com
Name of Counsel: _____
Address of Counsel: _____
Email Address of Counsel: _____

2. Participant's Claim number and the nature of Participant's Claim:

Claim Number: 17BK 3283-LTS
Nature of Claim: PROMESA
By: Angeles Cruz Serrano
Signature
Angeles Cruz Serrano
Print Name

Title (if Participant is not an individual)

8/13/2021
Date

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Instructions for Filing Notice of Participation: If you are represented by counsel, this Notice must be filed electronically with the Court on the docket using the CM/ECF docket event Notice of Intent to Participate in Discovery for Commonwealth Plan Confirmation, in *In re Commonwealth of Puerto Rico*, Case No. 17 BK 3283-LTS, through the Court's case filing system on or before the applicable deadline. If you are not represented by counsel, you may instead mail this Notice to the Court's Clerk's Office at: United States District Court, Clerk's Office, 150 Ave. Carlos Chardon Ste. 150, San Juan, P.R. 00918-1767.

Angeles Cruz Serrano
Hc-3 Box 40592
Caguas, P.R 00725-9736

SAN JUAN PR 009
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P O Box 4708
New York, NY 10163-4708

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